

U.S. DISTRICT COURT  
EASTERN DISTRICT-WI  
FILED

2018 OCT 12 P 3:54

STEPHEN C. DRIES  
CLERK

## COMPLAINT

(for non-prisoner filers without lawyers)

### UNITED STATES DISTRICT COURT EASTERN DISTRICT OF WISCONSIN

(Full name of plaintiff(s))

Calbert Turner

v.

Case Number:

**18-C-1618**

(Full name of defendant(s))

Aurora Health Center  
Dr. Michael Pother And  
his Receptionist  
Aurora Health Pharmacy

(to be supplied by Clerk of Court)

#### A. PARTIES

1. Plaintiff is a citizen of Wisconsin and resides at  
(State)

1900 12<sup>th</sup> St Racine, WI 53403  
(Address)

(If more than one plaintiff is filing, use another piece of paper.)

2. Defendant Aurora Health Center  
Dr. Michael Pother, his Receptionist  
Aurora Pharmacy

Complaint - 1

is (if a person or private corporation) a citizen of Wisconsin

and (if a person) resides at 8400 Washington Av Racine WI 53403  
(State, if known)  
(Address, if known)

and (if the defendant harmed you while doing the defendant's job)

worked for Aurora 8400 Washington Av Racine WI 53403  
(Employer's name and address, if known)

(If you need to list more defendants, use another piece of paper.)

#### B. STATEMENT OF CLAIM

On the space provided on the following pages, tell:

1. Who violated your rights;
2. What each defendant did;
3. When they did it;
4. Where it happened; and
5. Why they did it, if you know.

On Oct 10 2016 I went to see Dr Michael Pothen at Aurora Health Center. He ~~send~~ gave me to get some Metronidazole. I went to Aurora Pharmacy the pill of Metronidazole make mesick, make my feet and toe's hurt. The more I took the more pain I got. I call back to Dr Michael Pothen office I talk to his Receptionist, I need to talk to Nurse Nurse I need to talk to Dr Michael Pothen. The next time I call Dr Michael Pothen office I can't talk to any one would not pick up I call and call for 1 week no one answer I call United Health Care and make my Complaint next 3

For 1 to 2 weeks no one answer my call  
So I make a complaint with United  
Health Care on this matter my Health Plan  
That was from Oct 10 - 24 of Oct  
I call Dr Michael Pothen office to talk  
With him about this matter.  
Then The next time I see Dr Michael  
Pothen he talk to me like I did some-  
thing wrong. Because I also fill a  
complaint with Aurora health Care.  
also. All of ~~the~~ them discriminated  
against me. Why I do not know.

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C. JURISDICTION

I am suing for a violation of federal law under 28 U.S.C. § 1331.

OR

I am suing under state law. The state citizenship of the plaintiff(s) is (are) different from the state citizenship of every defendant, and the amount of money at stake in this case (not counting interest and costs) is \$ \_\_\_\_\_.

D. RELIEF WANTED

Describe what you want the Court to do if you win your lawsuit. Examples may include an award of money or an order telling defendants to do something or to stop doing something.

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**E. JURY DEMAND**

I want a jury to hear my case.

YES       NO

I declare under penalty of perjury that the foregoing is true and correct.

Complaint signed this 12 day of Oct 2018.

Respectfully Submitted,

Calbert June 1

Signature of Plaintiff  
1-662-694-0752 my sister

Plaintiff's Telephone Number  
A message phone

Plaintiff's Email Address

not at this time

Egillia Miller 366 Miller Hannah Rd Louisville MS  
(Mailing Address of Plaintiff) 39339

(If more than one plaintiff, use another piece of paper.)

**REQUEST TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING THE  
FILING FEE**

- I DO request that I be allowed to file this complaint without paying the filing fee. I have completed a Request to Proceed in District Court without Prepaying the Filing Fee form and have attached it to the complaint.
- I DO NOT request that I be allowed to file this complaint without prepaying the filing fee under 28 U.S.C. § 1915, and I have included the full filing fee with this complaint.